

**Financial Disclosure Statement Filing**

Filing Confirmation # 787

**Step 1: Statement Information**

Report Year: 2014  
Date Filed: 1/30/2015  
Filing Type: Original  
Report Type: Financial Disclosure

**Name of Filer and Spouse**

Filer First Name: Jordan  
Filer Last Name: Hill  
Spouse First Name: Jennifer  
Spouse Last Name: Hill  
County of Residence: Nicholas

**Step 1: Business Address**

Name: Summersville Regional Medical Center  
Address 1: 400 Fairview Heights Road  
Address 2:  
City: Summersville  
State: WV  
Zip Code: 26651

**Step 2: Candidate / Officeholder Information**

Do you currently hold a county circuit or state elected office?: Yes  
Title Of Office: • WV House of Delegates

Have you filed **No**  
 candidacy papers for  
 public office in the next  
 election?:

### Step 3: Appointed Positions

No Positions to Report

### Step 4: Business Names

Type	Business Name
Self	Summersville Regional Medical Center
Spouse	First Community Bank

### Step 5: Employment

Type	Employer Name	Address	Description
Self	Genesis Healthcare	152 Saddleshop Road Hilltop, WV25855	Environmental S...
Self	Summersville Regional Medical Center	400 Fairview Heights Rd Summersville, WV26651	Housekeeper - E...
Spouse	Hartley & Straub PLLC	522 Seventh Street Moundsville, WV26041	Accounting inte...
Spouse	First Community Bank	902 Northside Drive Summersville, WV26651	Financial Assis...

### Step 6: 20% Gross Income Categories

	Self	Spouse
Financial Banks		
Financial Banks, Savings and Loan Assoc.		

Self      Spouse

**Financial**

Loan or Finance Companies

**Financial**

Companies

**Other**

Hospitals or Other Health Care Providers

**Step 7: All Sources of Income over \$1,000, including Employment**

Type	Category / Source	Description
Self	Employment	Environmental Services Director at long term care facility
Self	Employment	housekeeper at a local hospital
Spouse	Employment	bank teller at a local bank
Spouse	Employment	accounting intern at privately owned accounting firm

**Step 8: Business Interests and Commercial Real Estate**

Neither my spouse nor I had any business interests meeting these criteria

**Step 9: For-Profit Business or Organization**

Neither my spouse nor I serve on a Board of Directors or is an Officer

**Step 10: Non-Profit Organizations**

Neither my spouse nor I serve on a Board of Directors or is an Officer

**Step 11: Sales or Contracts with Governmental Entities**

Neither my spouse nor I had contract for the sale of any goods or services to a state, county, municipal or other local governmental agency, either directly or through a partnership, corporation or association in which either you or your spouse owned or controlled more than (10%) ten percent during the past calendar year

**Step 12: Adult Children - Public Employment**

I have no adult children or step children employed by state, county, or municipal government

**Step 13: Debts Owed to Others**

I have no reportable debts

**Step 14: Debts Owed to You**

I have no reportable debts

**Step 15: Gifts**

I have no received reportable gifts